

NEW HAMPSHIRE DIVISION OF FAMILY ASSISTANCE PROGRAM FACT SHEET

This fact sheet is intended to provide you with basic information concerning eligibility, income, and resource requirements for each of the following programs: New Hampshire Employment Program (NHEP), Unemployed Parent Program (UP), Family Assistance Program (FAP); the State Supplement Programs which include Old Age Assistance (OAA), Aid to the Permanently & Totally Disabled (APTD), and Aid to the Needy Blind (ANB); the Medical Assistance Program (MEDICAID); the Food Stamp Program; Nursing Facility Care; Child Support Services; Qualified Medicare Beneficiaries (QMB), Specified Low Income Beneficiaries (SLMB/SLMB135); Child Care; Healthy Kids Medical Coverage for Children; Medical Coverage for Pregnant Women; and Medicaid for Employed Adults with Disabilities (MEAD).

By policy, different types of income and resources are either counted or not counted to determine eligibility. This can vary from program to program. In addition, there are amounts that can be subtracted from income. These also vary by program and are shown below as “disregards and deductions.” Examples of income are wages, rental income, and most benefit income including Social Security and SSI. Examples of resources are cash on hand, bank accounts, stocks/bonds, and unoccupied real property. Applicants must verify income, resources, disregards and deductions, identity, citizenship or alien status, social security numbers, residency, and all other eligibility factors required by the specific programs of assistance.

If you think a family or individual may be eligible for one of our programs, please have them call, write, or visit the Department of Health and Human Services District Office nearest them for more details. Information is also available at [www.dhhs.nh.gov](http://www.dhhs.nh.gov).

PROGRAM TITLE	NH EMPLOYMENT PROGRAM (NHEP), UNEMPLOYED PARENT PROGRAM (UP), & FAMILY ASSISTANCE PROGRAM (FAP)	STATE SUPPLEMENT PROGRAM (OAA, APTD, ANB)	MEDICAL ASSISTANCE (MEDICAID)	FOOD STAMP PROGRAM	NURSING FACILITY CARE																																											
DESCRIPTION	<p>NHEP, UP, and FAP provide financial &amp; medical assistance to needy families with dependent children in which one or both parents is disabled, deceased, unemployed, or absent from the home. Eligibility depends on income, resources, and expenses of a family. Families eligible for NHEP, UP, or FAP are automatically eligible for medical assistance.</p> <p>Able-bodied recipients of UP or NHEP financial assistance must meet NHEP work requirements. There is no mandatory work requirement for FAP.</p> <p>FAP is available to families with no able-bodied parents or when a relative other than a parent is caring for the child(ren).</p>	<p>The State Supplement program provides financial assistance to needy individuals who meet the definition of one of the following categories:</p> <ol style="list-style-type: none"><li>Old Age Assistance (OAA) - 65 years of age or older, or</li><li>Aid to the Permanently &amp; Totally Disabled (APTD) - physically or mentally disabled and between the ages of 18 &amp; 64, or</li><li>Aid to Needy Blind (ANB) - blind (no age limit)</li></ol> <p>Eligibility depends on income, resources and living arrangement. Individuals eligible for State Supplement are also eligible for medical assistance.</p>	<p>The Medicaid program pays for certain health care costs (doctor and hospital bills, prescriptions, dental care for children, etc.) for individuals who meet the technical and categorical requirements of the NHEP/FAP or State Supplement programs, or MEAD. Children’s coverage is called “Healthy Kids” (see other side).</p> <p>Adults and children with severe disabilities may also be eligible.</p> <p>If an individual meets all program requirements except is over the income limit, partial coverage can be provided under the In &amp; Out program.</p>	<p>The Food Stamp program provides assistance to eligible families to purchase food items essential for good health. Eligibility for food stamps depends on the household’s income, resources and expenses. Households must meet gross and net income limits. Households with a member who is elderly <u>or</u> disabled need only meet the net income test. Households with a member who is <u>both</u> elderly <u>and</u> disabled have higher gross income limits. If all members of the household receive SSI, NHEP/FAP financial assistance, and/or State Supplement, there are no income or resource limits.</p> <p>Most recipients must look for and keep a job. Able-bodied Adults Without Dependents (ABAWD) must also meet special ABAWD work requirements to receive more than 3 months of food stamps in a 36-month period.</p>	<p>The Medicaid program can cover the cost of nursing facility care for individuals who are unable to afford the cost. To receive payments for nursing facility care, an individual must:</p> <ul style="list-style-type: none"><li>meet the general, technical, categorical and financial requirements of a Medicaid program; and</li><li>have medical needs that require nursing facility care.</li></ul> <p>Certain individuals meeting these requirements may be eligible to receive community-based services under one of several Home and Community-Based Care waivers instead of entering a nursing facility.</p>																																											
MONTHLY INCOME LIMITS	<table><tr><td>Group Size</td><td>Max Net Income*</td></tr><tr><td>1</td><td>\$489</td></tr><tr><td>2</td><td>\$556</td></tr><tr><td>3</td><td>\$625</td></tr><tr><td>4</td><td>\$688</td></tr></table> <p>*Less, if living in subsidized housing</p>	Group Size	Max Net Income*	1	\$489	2	\$556	3	\$625	4	\$688	<table><tr><td>Group Size</td><td>Net Income Limit</td></tr><tr><td>1</td><td>\$ 637</td></tr><tr><td>2</td><td>\$ 935</td></tr><tr><td>3</td><td>\$1,234</td></tr></table> <p>Applicants in Group Living Arrangements have higher income limits.</p>	Group Size	Net Income Limit	1	\$ 637	2	\$ 935	3	\$1,234	<table><tr><td>Group Size</td><td>Net Income Limit</td></tr><tr><td>1</td><td>\$591</td></tr><tr><td>2</td><td>\$675</td></tr><tr><td>3</td><td>\$683</td></tr><tr><td>4</td><td>\$691</td></tr></table>	Group Size	Net Income Limit	1	\$591	2	\$675	3	\$683	4	\$691	<table><tr><td>Group Size</td><td>Maximum Gross Income</td><td>Maximum Net Income</td></tr><tr><td>1</td><td>\$1,062</td><td>\$ 817</td></tr><tr><td>2</td><td>\$1,430</td><td>\$1,100</td></tr><tr><td>3</td><td>\$1,799</td><td>\$1,384</td></tr><tr><td>4</td><td>\$2,167</td><td>\$1,667</td></tr></table>	Group Size	Maximum Gross Income	Maximum Net Income	1	\$1,062	\$ 817	2	\$1,430	\$1,100	3	\$1,799	\$1,384	4	\$2,167	\$1,667	<p>The individual's net monthly income must be less than the Medicaid rate for the facility.</p> <p>The individual's income, after expenses and deductions, is used to offset the cost of care, with the balance paid by Medicaid.</p>
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RESOURCE LIMITS	<p>The resource limits for NHEP, UP, and FAP financial assistance are:</p> <p>\$1,000 for applicants, and \$2,000 for recipients.</p>	<p>The resource limit for OAA, APTD and ANB financial assistance is \$1,500. Certain life insurance policies and burial funds are not counted.</p>	<p>One person - \$2,500 Two persons - \$4,000 Three or more - \$4,000 plus \$100 for each additional person in the assistance group above two.</p>	<p>Households in which at least one member is disabled or age 60 or older: - \$3,000</p> <p>All other households: - \$2,000</p>	<p>The resource limit for nursing facility care is \$2,500.</p>																																											
DISREGARDS & DEDUCTIONS	<ul style="list-style-type: none"><li>20% of earned income for applicants</li><li>Child/Dependent Care Costs</li><li>Court-Ordered Child/Spousal Support</li><li>Self-Employment Expenses</li></ul>	<ul style="list-style-type: none"><li>\$13 standard disregard</li></ul> <p>For working individuals:</p> <ul style="list-style-type: none"><li>\$65 (APTD or OAA) or \$85 (ANB), and</li><li>Impairment Related Work Expenses, and</li><li>½ of remaining earned income</li></ul>	<p>Deductions for NHEP/FAP and the State Supplement programs also apply for most Medical Assistance programs.</p>	<ul style="list-style-type: none"><li>Shelter</li><li>Utilities</li><li>Self-Employment Expenses</li><li>Medical for seniors and disabled</li><li>Standard household deduction</li><li>Child/Dependent Care</li><li>Paid Child Support</li></ul>	<p>When determining cost of care:</p> <ul style="list-style-type: none"><li>\$56 Personal Needs Allowance (\$90 VA)</li><li>Allocation to dependents</li><li>Uncovered Medical expenses</li></ul>																																											
OTHER ELIGIBILITY CRITERIA	<p>Rights to child support are automatically assigned to the Department for NHEP and FAP, and NHEP/FAP clients must cooperate with child support requirements. There is a 60-month lifetime limit on receiving financial assistance through NHEP &amp; UP.</p>	<p>Applicant must apply for SSI, and must agree to a lien on all real estate owned by the assistance group. If living together, a spouse's income, resources, and needs are considered when determining eligibility.</p>	<p>SSI is not counted as income. Medicaid applicants and recipients must cooperate with the Office of Child Support to obtain and enforce legal orders for medical support and to establish paternity for all children born out-of-wedlock.</p>	<p>Parents and children under age 22 living together are considered one household. Exceptions may be made if parents are over 60, disabled and receiving SSA/SSI, and for children aged 22 and older who purchase and prepare meals separately from their parents.</p>	<p>The nursing facility must be licensed and certified by the State of NH.</p> <p>If appropriate, the individual must apply for VA Aid and Attendance allowance benefits.</p>																																											

PROGRAM TITLE	CHILD SUPPORT SERVICES	CHILD CARE	HEALTHY KIDS FOR CHILDREN AND MEDICAL COVERAGE FOR PREGNANT WOMEN		QUALIFIED MEDICARE BENEFICIARIES (QMB)	MEDICAID FOR EMPLOYED ADULTS WITH DISABILITIES																																																								
DESCRIPTION	<p>The Division of Child Support Services (DCSS) locates absent parents, establishes paternity and support orders, reviews orders to see if they meet NH guidelines, and enforces child support orders. These services are provided regardless of whether the noncustodial parent lives in NH or out of state.</p> <p>The DCSS collects and disburses child support payments. Methods to collect child support include interception of tax refund checks, mandatory wage withholding, interception of NH lottery prizes, and liens against property. The DCSS can also report delinquent payers to a credit bureau, and can request that a licensing board or agency suspend, revoke, or deny a payer's license if he or she is not in compliance with a legal order for support. Passports may also be suspended, revoked, or denied.</p> <p>The DCSS is mandated to provide child and medical support services to NHEP/FAP recipients and must provide medical support services to Medicaid-only recipients.</p> <p>In addition, the DCSS provides services to families that are not receiving public assistance. There is a separate application for these services. There is no fee.</p>	<p>The child care program helps pay for child care needed for training, education or employment. Costs are reimbursed up to established maximums that differ based on gross income, the age of the child and whether the care is provided by a contract center or non-contract provider. Higher payments may be available to providers who care for disabled children.</p> <p>(STEP 1) <b>MAXIMUM REIMBURSEMENT RATES</b></p> <p><b><u>Contract Child Care Center</u></b></p> <p>Children under 3: up to \$31.87/day for full-time care. up to \$4.94/hour for part-time care.</p> <p>Children 3 yrs. through 12 yrs: up to \$26.88/day for full-time care. up to \$4.20/hour of part-time care.</p> <p><b><u>Noncontract Licensed Child Care</u></b></p> <p>Children under 3: up to \$26.52/day for full-time care. up to \$4.10/hour for part-time care.</p> <p>Children 3 yrs. through 12 yrs: up to \$24.57/day for full-time care. up to \$3.78/hour for part-time care.</p> <p><b><u>Noncontract License Exempt</u></b></p> <p>Children under 3: up to \$22.47/day for full-time care. up to \$3.47/hour for part-time care.</p> <p>Children 3 yrs. through 12 yrs: up to \$18.22/day for full-time care. up to \$2.73/hour for part-time care.</p>	<p>Children up to age 19 with income no higher than 185% of the federal poverty income limits can get medical coverage under the Healthy Kids-Gold program. Infants under age 1 with income higher than 185% but no more than 300% of federal poverty income limits can also get Healthy Kids-Gold coverage. There is no premium for Healthy Kids-Gold coverage.</p> <p>Children age 1 up to age 19 with income higher than 185%, but no more than 300%, of federal poverty income limits, can get medical insurance under the Healthy Kids-Silver program. There is a monthly premium for this insurance, and these children cannot currently be covered under any other medical insurance nor have had coverage in the last 6 months.</p> <p>Medical coverage is available to pregnant women of any age whose income is no higher than 185% of the federal poverty income limit.</p> <p>Parents, children, or pregnant women <u>already receiving services</u> at certain community agencies, such as hospitals, well child or prenatal clinics, and WIC may apply there for Healthy Kids or medical coverage for pregnant women.</p>		<p>Certain Medicare beneficiaries who are entitled to Medicare Part A insurance, and whose income is no more than 100% of the federal poverty level, may be eligible to have Medicare Part A and B premiums, deductibles and co-insurance costs paid. Some of these individuals may also be eligible for other programs, including Medicaid.</p> <p><b>SPECIFIED LOW-INCOME MEDICARE BENEFICIARIES (SLMB/SLMB135)</b></p> <p>Certain Medicare beneficiaries entitled to Medicare Part B but with higher incomes may be eligible for payment of all or part of their monthly Medicare Part B premiums.</p> <p><b>Individuals with income between 100% and 120% of the federal poverty level</b> may be eligible for payment of their monthly Medicare Part B premiums and may also be eligible for other programs, including Medicaid.</p> <p><b>Individuals with income between 120% and 135% of federal poverty levels</b> may be eligible for payment of the Medicare Part B premium, but cannot also be eligible for other Medicaid programs in the same month.</p>	<p>Medicaid for Employed Adults with Disabilities (MEAD) provides medical coverage to disabled working adults. MEAD has higher income and resource limits than other Medicaid programs and allows eligible recipients to return to work or increase their earnings. Some individuals who are eligible for MEAD may be required to pay a health insurance premium.</p> <p>To be eligible for MEAD, an individual must:</p> <ul style="list-style-type: none"><li>• be 18 through 64 years old;</li><li>• be employed or self employed for pay;</li><li>• earn at least federal minimum wage and contribute to FICA;</li><li>• meet MEAD income and resource criteria noted below;</li><li>• meet ANB or APTD medical criteria; <b>or</b></li><li>• have a documented medical impairment that is included in the Social Security Administration's Listing of Impairments and that is expected to last 48 months or longer; <b>and</b></li><li>• enroll in cost-free health insurance if their employer offers it.</li></ul> <p>Individuals and couples with income less than 150% of the federal poverty level are not required to pay a premium. Premiums are reduced by the cost of other health insurance.</p>																																																								
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DISREGARDS & DEDUCTIONS	N/A	N/A	<ul style="list-style-type: none"><li>• \$90 for each working individual</li><li>• Court-Ordered Child/Spousal Support</li><li>• Wage Garnishments</li><li>• Child/Dependent Care Costs</li></ul>		<ul style="list-style-type: none"><li>• \$65 of earned income</li><li>• ½ of remaining earned income</li><li>• \$20 standard deduction</li></ul>	<ul style="list-style-type: none"><li>• ANB, APTD, or OAA deduction</li><li>• Impairment Related Work Expenses</li><li>• ½ of remaining earned income</li><li>• Standard adult disregard</li><li>• Employability account/medical savings account</li></ul>																																																								
OTHER ELIGIBILITY CRITERIA	NHEP/FAP with Medicaid, and Medicaid-only applicants/recipients must cooperate with the DCSS as a condition of eligibility.	An individual does not have to receive public assistance to receive help with child care. Child care must be necessary so that the parents can attend job training, look for a job or go to school or work.	Once eligible, pregnant women receive coverage through the 60th day post partum regardless of income. Children born to mothers receiving medical coverage at the time of birth are automatically eligible for up to one year so long as they remain with the mother in NH and mother remains eligible.		An applicant must also meet the general nonfinancial requirements/conditions of eligibility for Medicaid, such as filing an application, obtaining a Social Security number, etc. SSI is not counted as income.	An applicant must also meet the general nonfinancial requirements/conditions of eligibility for Medicaid. SSI is not counted as income when determining MEAD eligibility, but is counted when determining the premium amount.																																																								